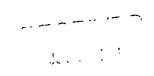
## Pa1000054308

(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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J DENNIS JUL 24 2021

## COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION:		
DOCUMENT NUMBER: P2100	0054308	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this ir	natter to the following:	
Joseph i Saulen	Name of Contact Person  July Firm/ Company	_
4000 2	4th St N Lot 816	
St Peter	Address	_
For further information concerning this matter, ple	tase call:	
Joseph Saulen Name of Contact Person	at 1727 , 307 - 6747	
₩ Name of Contact Person	Area Code & Daytime Telephone Numb	cr
Enclosed is a check for the following amount made	e payable to the Florida Department of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐\$60.00 Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment

to

Articles of Incorporation

		•	
n	ı		

1 Jaulen, Inc.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P21000054308	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	g amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Inc.," or "Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain "chartered," "professional association," or the abbreviation "P.A."	- n "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  4000 24th St V Lot 816  (Florida street address)  New Registered Office Address: St. Peters Durg . Florida 33	714
(City) (Zip C  New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	2 :
Joseph Saulen Gignature of New Registered Agent. If changing	(1) (1) (1)
Check if applicable	Ċù
The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	æ" CN

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee, C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	<u>PT</u>	John Doe	1	
X Remove	<u>V</u>	Mike Jones	NIA	
X Add	<u>sv</u>	Sally Smith	/V / / T	
Type of Action (Check One)	<u>Title</u>	Name	Į.	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3.) Change	*****			
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add	_		-	
Remove				

attach additional sheets, if necessary).	(Be specific)	N	1/A		
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an amendment provides for an excl	hange reclassificativ	n. or cancellatio	n of issued share	<b>.</b>	
provisions for implementing the ame	endment if not conta	ined in the amer	idment itself:	<u> </u>	
(if not applicable, indicate N/A)	1	· //\			
	///	111			
	•,•••	,			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	-
Effective date if applicable:	
(no more than 40 days after amen	idment file date)
Note: If the date inserted in this block does not meet the applicable statutory fil document's effective date on the Department of State's records.	ing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors action was not required.	without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes by the shareholders was/were sufficient for approval.	cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting group must be separately provided for each voting group entitled to vote separately or	
"The number of votes east for the amendment(s) was/were sufficient for a	pproval
by	<del>.</del>
(voting group)	
Dated 06/24/21	
Signature Oseph Soulen	
(By a director, preschent or other officer – if directors of	
selected, by an incorporator – it in the hands of a recei appointed fiduciary by that fiduciary)	ver, trustee, or other court
T 1 C 1.	
(Typed of printed name of person si	M\ igning)
Promise / Aug	
- Mestdent / Own	<u>થ</u>
(Title of person signing)	